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Notes on Preventive Medicine for Medical Officers, United States Navy.

INSTRUCTIONS TO MEDICAL OFFICERS.

DEPARTMENT OF THE NAVY, BUREAU OF MEDICINE AND SURGERY, Washington, D. C., November 9, 1918.

Notes on the Present Epidemic of Influenza.

Up to and including November 9, 1918, there have been reported from all shore stations in the United States 54,585 cases of influenza with 2,795 deaths. For the week ended November 9, 1918, there were 1,295 cases reported from shore stations as against 1,793 cases reported during the week ended November 2, 1918. Except for four new cases which developed in the Pacific Fleet no recent reports have been received from other ships. The total number of cases so far reported from the force afloat is 8,564 with 332 deaths, making a grand total for ships and shore stations of 63,149 cases of influenza with 3,127 deaths.

The following table furnishes the latest information of a statistical nature:

7 Habraca 100 20,9 0 55 10.8 7 Famber 107 124 101.8 0 75 12.6 0 7 St. Landin 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Total influenza to date.	New cases week ended Nov. 9.	New cases week ended Nov. 2.	Total deaths.	Case fatality rate per cent.
THE SHIP DO BEET AND THE SHIP OF THE SHIP	37 - 3 60	17 (2) 55			
Third naval district	5, 235	136	267	270	5. 15
Naval training camp, Pelham Park, N. Y	2, 615	3	1 28	108	4. 13
Marine barracks, Quantico, Va	2,802	284	195	104	3.71
Sixth naval district, exclusive of training camp, Charleston,	8 100	190 190	1 42 1	· lergeries	
S. C., and marine barracks, Paris Island, S. C	905	48	12	64	3.19
Naval training camp, Charleston, S. C.		44	74]	
Marine barracks, Paris Island, S. C.	781	146	283	19	2.43
Eighth naval district, exclusive of naval station, New Orleans,	8 109	1.0168			
naval station, Pensacola, and naval training camp, Gulfport,	32	0 00	00	- Linear par	0.00
Miss	300	6	33	1 01	2, 33
Naval station, New Orleans, La	1,012	11	11	34	3. 35
Naval station, Pensacola, Fla	1,474	5	20	24	1.62
Naval training camp, Gulfport, Miss.	875	The same of the sa	3	20	2. 28
Twelfth naval district, exclusive of naval training camp, San	是是一次成	ED TEN DE			
Diego, Cal., naval station, Mare Island, Cal., and naval	1 770	101	904	39	2. 51
training station, San Francisco, Cal	1,553	121	284	6	2. 51
Naval training camp, San Diego, Cal		.23		71	
Naval station, Mare Island, Cal	1,415	123	144	11	5. 01
Naval training station, San Francisco, CalOther shore stations	100 407	338	365	2,029	6.06
Other shore stations	33, 431	338	. 600-	4,049	0.00
Maria da sus stations	54, 585	1, 295	1,793	2,795	5. 1.1
Total, shore stations	8, 564	1, 490	1, 100	332	3. 88
Ships	0, 504			002	0.00
Grand total	63, 149			3, 127	4. 94
Grand Wal	00, 149			0, 12	1.01
		1		AND DESCRIPTION OF THE PERSON	

The following figures relative to the results obtained after the use of influenza vaccine at the marine barracks, Paris Island, S. C., are furnished by the senior medical officer at the marine barracks, Quantico, Va.:

A draft of 756 men was received from Paris Island, in the early part of November. Of these, 304 had not been vaccinated against influenza, and 39 or 12.8 per cent of them have since contracted the disease. Four hundred and fifty-two men of this draft had received from one to four inoculations of influenza vaccine and 72 or 15.9 per cent afterwards contracted influenza as follows:

After one inoculation, 11 out of 75 men (14.6 per cent) developed influenza. After two inoculations, 30 out of 226 men (13.2 per cent) developed influenza. After three inoculations, 8 out of 57 men (14 per cent) developed influenza. After four inoculations, 23 out of 94 men (24.4 per cent) developed influenza.

Deaths (stillbirths excluded) reported during the week ended Nov. 2, 1918, with death rates, in large cities of the United States.

Cities.		ed Nov. 2, 18.	C=correspondent C=corresponden	ending week, average of 3-1917.	Cities.		led Nov. 2, 18.	C=correspon 1917. A= week, 1913	average of
Cities.	Total deaths.	Annual rate per 1,000.	Total deaths.	Annual rate per 1,000.	Cities.	Total deaths.	Annual rate per 1,000.	Total deaths.	Annual rate per 1,000.
Albany. Atlanta Baltimore Birmingham Boston Buffalo Cambridge Chicago Cincinnati Cleveland Columbus Dayton Denver Fall River Grand Rapids Indianapolis Kansas City, Mo Los Angeles Louisville Lowell Memphis Milwaukee Minneapolis	79 613 123 319 613 42 2, 191 382 870 139 148 155 69 49 169 291 533 159	90. 0 21. 0 53. 8 33. 8 21. 7 67. 2 19. 2 44. 9 48. 1 65. 6 32. 9 59. 9 30. 1 27. 7 19. 2 31. 1 49. 6 51. 9 34. 4 28. 7 36. 0 24. 4	C 36 C 38 A 176 A 54 A 215 A 107 A 28 A 576 C 119 C 163 C 58 A 31 A 60 C 39 C 29 C 96 C 91 A 99 C 38 A 36 C 49 A 86 C 69	17. 6 23. 4 15. 7 16. 3 15. 0 12. 1 12. 9 12. 3 15. 0 12. 3 13. 7 12. 7 12. 4 15. 7 11. 4 17. 7 15. 5 11. 0 8. 2 16. 6 16. 8 19. 9	Newark New Haven New Orleans New York Oakland Omaha Philadelphia Pittsburgh Portland, Oreg Providence Richmond Rochester St. Louis St. Paul San Francisco Seattle Spokane Syracuse Toledo Washington, D. C. Worcester	42 95 175 302 102	50. 1 76. 4 62. 9 52. 9 70. 5 37. 5 53. 2 100. 7 36. 0 40. 3 32. 9 50. 0 28. 9 30. 8 89. 0 21. 1 13. 9 31. 3 45. 2 42. 6 32. 0	A 98 C 34 A 149 A 1,209 A 37 C 27 466 C 205 C 43 C 51 C 76 C 227 C 39 C 178 A 46 C 26 C 36 A 58 A 116 C 52	12. 8 11. 6 21. 2 11. 5 10. 0 8. 4 14. 2 18. 2 7. 3 9. 0 16. 8 15. 0 15. 4 8. 1 19. 7 7. 3 8. 6 6 11. 8 16. 0 16. 8

In the cities listed above there have been 74,232 deaths from influenza and pneumonia during the eight weeks ended November 2, 1918. The figures by weeks are as follows:

Disease.	Sept. 14.	Sept. 21.	Sept. 28.	Oct. 5.	Oct. 12.	Oct. 19.	Oct. 26.	Nov. 2.
InfluenzaPneumonia	19	193	904	2, 716	6, 809	12, 289	13, 110	9, 743
	299	405	855	2, 044	4, 606	7, 648	7, 734	4, 858



A REPORT ON THE FINDINGS IN 116 NECROPSIES PERFORMED IN THE U. S. S. MERCY ON BODIES DEAD OF INFLUENZA.

By Lieut. THOMAS L. RAMSEY (Medical Corps), U. S. N. R. F.

The epidemic of influenza started in the Atlantic Fleet early in September. The cases first coming to autopsy were those of simple broncho-pneumonias with a mixed bacteriology. These were characterized by nodular consolidated areas in one or more lobes around central bronchioles which were filled with pus. These areas were surrounded by congested and oedematous lung tissue involving sometimes an entire lobe. At times two or three lobes were involved.

Material taken from affected areas was first streaked on blood agar plates and then smeared on glass slides and stained. Gram stains of the direct smears showed a mixed bacteriology, the pneumococcus predominating. Other bacteria found were staphyolococci, Micrococcus catarrhalis, streptococci, Bacillus mucosus, and influenza bacilli.

The blood agar plates were incubated and colonies studied from time to time as they made their appearance. In this manner the various microorganisms were identified as the colonies

became visible.

Colonies identified as pneumococci were fished and transplanted into Avery's rabbitblood broth which after eight hours' incubation was subjected to agglutination tests with specific type sera. In this manner organisms were grouped according to type. Intraperitoneal inoculation of white mice was resorted to when agglutination reactions in the Avery media were obscure. Other organisms were also identified from day to day as they made their appearance on the plates. It was noticed that the fine colonies of influenza bacilli could not be detected until after three or four days' incubation.

This routine procedure of making direct smears from the affected parts and of growing cultures for study was continued on all cases which came to autopsy during the epidemic.

After the epidemic had lasted for a few days it was noticed that broncho-pneumonic areas were increased in extent as compared with earlier cases, that is more lung tissue was involved and hemorrhages into the lung around affected areas were so extensive that whole lobes were filled with a combination of consolidated areas and blood clot. Pleurisy with effusion, and the formation of purulent plastic exudates with adhesions were noted more frequently and pericardial involvement, the result of direct extension, was found in many cases. Cultures now showed the infection to be more truly pneumococcic as pure cultures of this organism were obtained from the infected parts in nearly every case. Cultures from the heart's blood showed that septicemia was present in every case where purulent fluid was found in the chest. This

proved to be due to a Type II pneumococcus in every instance.

When septicemia cases began to appear autopsy findings indicated that the patients had succumbed to infection with a much more virulent microorganism and the lung findings were not nearly so pronounced. Some of the cases proved to be hemorrhagic speticemia with no lung involvement other than extensive hemorrhages which sometimes occurred into the lung tissues. The important lesions found in this group of cases were hemorrhages into the lungs, ventricles of the brain or suprarenal glands. Later, cases of meningeal involvement with or without broncho-pneumonia, began to be seen. Many of these cases before death had no signs of meningeal involvement other than those of the accompanying septicemia, but at autopsy they showed a purulent spinal fluid containing pneumococci.

From these findings one can readily see that the infection which started as a rather mild complicating broncho-pneumonia rapidly increased in virulence until it reached its climax in the involvement of the blood stream and meninges.

The cases autopsied were divided into the following groups:

Group I. Simple broncho-pneumonia.

Group II. Lobar pneumonia.
Group III. Massive broncho-pneumonia.
Group IV. Hemorrhagic broncho-pneumonia.

Group V. Broncho-pneumonia with septicemia.

Group VI. Broncho-pneumonia with meningitis.

Group VII. Hemorrhagic septicemia.

Group VIII. Pneumococcus meningitis.

In 9 of the 116 cases no organisms were recovered, because the bodies had been kept in the mortuary ice box before coming to autopsy.

The pathology of these groupings is submitted separately in order to bring out more clearly

the differential findings.

GROUP I. SIMPLE BRONCHO-PNEUMONIA (8 CASES).

Pathology.—The findings are those of broncho-pneumonia; namely, one or more lobes showing areas of consolidation around the smaller bronchioles which were filled with pus, the air spaces themselves being filled with purulent material. In the early stages of the disease the consolidated area was reddish to reddish brown, turning gray as resolution set in. The surrounding lung tissue was congested and oedematous sometimes extending to other consolidated areas in the same lobe, thus simulating consolidation of the entire lobe. The heart was rarely involved in this type of cases except when acutely dilated as a terminal process. Cultures from the heart's blood were negative. There were eight cases in this group, and pneumococci were found in lung cultures from seven. In one case the bacteriology was not determined.

The types of pneumococci found were: Type I, 3 cases; Type II, 2 cases; type not determined, 2 cases. Associated with pneumococci there were found stapholococci, streptococci, B. influenzæ, B. mucosus, and M.

catarrhalis, indicating a very mixed bacteriology in this group.

GROUP II. LOBAR PNEUMONIA (7 CASES).

Pathology.—The consolidation found in this group was typically that of true lobar pneumonia, the lung involvement being usually unilateral, with no hemorrhages into the lung tissue, no complicating pleurisy except of a dry fibrous character which was found in one case. There was no myocardial involvement, although acute dilatation of the heart was found in two cases with extensive lung involvement. The heart's blood was negative for bacteria. Direct smears from lungs were positive for pneumococci in five cases.

Type II pneumococcus was found in one case. Pneumococci in the other four cases were not typed. Staphylococci, B. influenza and B. mucosus were found associated in several of the cases. The bacteriology in two instances

was not determined.

GROUP III. MASSIVE BRONCHO-PNEUMONIA (33 CASES).

Pathology.—That of a very extensive broncho-pneumonia where the areas of consolidation around the pus filled bronchioles were so numerous and adjacent as to cause consolidation of nearly, if not all, of the affected lobe. Several lobes were involved, with congestion and edema of the other parts; and the breathing capacity was much impaired. The body for the most part was very much discolored, and the right heart was acutely dilated in almost every instance. In 14 cases the pleura was involved by direct extension of the inflammatory process with adhesions fibrous in character. Myocarditis and nephritis occurred in a small percentage of these cases, probably due to febrile disturbances. Heart blood was negative for bacteria in this series. No case with effusion or purulent exudate was classified in this group.

The bacteriology was determined in 30 cases.

Pneumococci found in 26 cases: Type I, 5 cases; Type II, 2 cases; Type III, 5 cases; Type IV, 4 cases; type not

determined, 10 cases.
Staphylococcus occurred alone in 2 cases, associated in 12. B. influenzæ occurred alone in 2 cases, associated in 9. Bacteriology not determined in 3 cases.

GROUP IV. HEMORRHAGIC BRONCHO-PNEUMONIA (18 CASES).

Pathology.—That of massive broncho-pneumonia type, associated with extensive hemorrhages into the lung tissues so that affected lobes were completely filled with blood. Several lobes were involved in many cases; those not involved in the hemorrhagic process were very much congested and edematous, thereby impairing the breathing space. The pleura was sometimes involved by direct extension of the inflammatory process. Adhesions, if any, were fibrous in character. There was no effusion or purulent exudates in this series, and the heart's blood was negative for bacteria. Associated myocarditis and nephritis occurred in many of the cases.

Bacteriology determined in 18 cases.

Pneumococci found in 18 cases: Type I, 1 case; Type II, 5 cases; Type III, 4 cases; Type IV, 1 case; type not

determined, 7 cases.

Staphylococcus associated in 9 cases; streptococcus associated in 3 cases; B. influenza associated in 3 cases; B. mucosus associated in 1 case.

GROUP V. BRONCHO-PNEUMONIA WITH SEPTICEMIA (26 CASES).

Pathology.—The broncho-pneumonia found had not developed to any great extent before the more septic process terminated fatally. Empyema occurred in a large percentage of this group along with plastic purulent exudates into the thoracic cavity, pericardium, and even into the peritoneum. Adhesions of lung to thoracic wall occurred in most of these cases. Cultures from exudates and heart's blood contained pneumococci in every case. Myocarditis and endocarditis with vegetations on the heart valves occurred in a large percentage of the cases. Nephritis was found in 20 of the 26 cases.

Bacteriology determined in 25 cases.

Pneumococci were isolated in 23 cases: Type I, 2 cases; Type II, 7 cases; Type III, 6 cases; type not determined,

Staphylococcus associated in 11 cases; streptococcus associated in 4 cases; M. catarrhalis associated in 2 cases; B. influenza associated in 6 cases; B. mucosus associated in 2 cases; streptococcus viridens pure culture, in 2 cases. Bacteriology not determined in 1 case.

GROUP VI. BRONCHO-PNEUMONIA AND MENINGITIS (12 CASES).

Pathology.—The broncho-pneumonic process had not progressed extensively before associated meningitis occurred Pathology.—The broncho-pneumonic process had not progressed extensively before associated meningitis occurred through invasion of the blood stream by the pneumococcus. In many cases death occurred early, even before marked meningeal symptoms had developed, the meningeal involvement being found post-mortem by spinal puncture, purulent fluid containing pneumococci being obtained. On opening the cranium, the brain was found covered with thick purulent material just beneath the pia, cheifly involving the vertex of the brain, the base being involved to a lesser extent. This purulent meningitis extended down the cord also, just beneath the pia mater. Sometimes this exudate was so thick in the spinal canal that nothing could be obtained by spinal puncture. No involvement of the myocardium was found in this group. Heart's blood cultures were positive in a large percentage of the cases.

The bacteriology was determined in 12 cases.

Pneumococcus was found in 12 cases: Type II, 8 cases; type not determined, 4 cases.

Note.—All pneumococci found in this condition proved to be Type II.
Staphylococcus was found associated in 3 cases. Streptococcus viridens was found associated in 3 cases. B. influenza was found associated in 1 case. B. mucosus was found associated in 1 case.

GROUP VII. HEMORRHAGIC SEPTICEMIA (5 CASES).

Pathology.—In this group no broncho-pneumonia was found, the lungs not being involved in any pneumococcic process although extensive hemorrhages had occurred into the lung tissue in two cases. Blood was obtained from the spinal canal by puncture in two cases. On opening the cranium in one case the ventricles of the brain were found filled with blood, due to hemorrhage from the choroidal plexus into the lateral ventricles. In four cases extensive hemorrhage was found in the suprarenal glands, entirely destroying the gland substance; in one of these cases no other pathology was found except this suprarenal apoplexy. Intraventricular apoplexy was found in one case, no involvement of the suprarenals being found. In no case was there involvement of the myocardium. Kidneys showed inflammatory involvement in a majority of these cases. Cultures from the heart's blood were generally negative, only one

positive blood culture being found which proved to be a Type I pneumococcus.

Pneumococcus found in lung smears in 2 cases, type not determined. No bacteria found in 1 case. Staphylo-

coccus was found associated in 1 case. B. mucosus was found associated in 1 case.

GROUP VIII. PNEUMOCOCCIC MENINGIPIS 1 (7 CASES).

Pathology.—In this group meningitis was the predominating post-mortem finding. The brain and spinal cord were extensively involved. Spinal fluid obtained by puncture contained large numbers of pus cells and pneumococci. There was no lung involvement. Cultures from the heart's blood were positive, pneumococci being found in five cases. In two cases small hemorrhages into the lung tissue were found. In one case hemorrhage into one of the suprarenal glands was found.

The bacteriology was determined in 7 cases.

Pneumococcus was found in 7 cases: Type I, 1 case; Type II, 1 case; Type IV, 1 case; type not determined, 4

Staphylococcus found associated in 1 case. Streptococcus associated in 1 case. B. mucosus associated in 1 case.

¹ It has since been reported from the U. S. Naval Hospital, Norfolk, Va., that nine patients were admitted to hospital from the U. S. S. Mercy vith diagnosis of meninglits, cerebrospinal. The health records of four contained notes stating that pneumococci were found in the spinal fluid. There were no notes regarding laboratory findings in the other cases. All had received polyvalent antipneumococcic serum intraspinally, and most of them intravenously also. All except one had been treated on the Mercy for periods of from twelve to twenty-one days. One had been on the Mercy only five days.

On admission to this hospital two cases were convalescent. The remainder ranged from moderately to scriously ill. One died the night after admission. Meningococci were found in four of the cases, including the one terminating fatally. Spinal puncture was not done in the two convalescent cases. To of the negative cases showed clear fluid, and the others, slightly cloudy fluid. No pneumococci were found in any case.

Note.	Bacteriology very mixed.	Probably Type II infections.	Bacteriology very mixed.	Pneumococcus Types II and III predominating.	Two cases streptococcus viridens. Types II and III pneumococcus predominate.	All pneumococci identified were Type II.	Positive blood culture in only one case. Condition one of toxemia.	Three heart's blood_cultures_positive_pneumo-cocci, various types.	Predominating Types II and III.
Associated.		0		-	. 21	0	0	0	-
M. catarrhalis alone.		:	67	-			:	:	0
Associated.	7		:	10 1 10	7.7: 1 4				10
B, mucosus alone,	:	63	6	en en	9	H	0	0	0
Associated.	4								25
B. influenzæ alone.	- Inc.		63	14 4 4 7			1000	- 10 000	63
Associated.	-	0		e0	4	60	0		15
Streptococcus alone.	11/4	:	1	Maria de	S		in the	POTTLO	63
Associated.	63	62	12	6	F	9	63	H	42
Staphylococcus alone.			S		100	1:	3:0		. 01
Bacteriology not determined.	H	c)	ಣ	0	-	0	62	0	6
No type identified.	~~	4	9		00	4	-07	4	7
*subbosonnend to saqyT	II 3 1 1 1 1 1 1 1 1 1		HHI T	LHHV.			T日日と		II 13 III 24 III 15 IV 8
Number cases pneumococcus found in culture.	7	70	26	18	23	12	က	7	101
Total number of cases.	00	7	33	18	56	12	ro	1	116
Group.	I. Simple broncho-pneumonia	II. Lobar pneumonia	III. Massive broncho-pneumonia	IV. Hemorrhagic broncho-pneu- monia.	V. Septic broncho-pneumonia	VI. Broncho-pneumonia with meningitis.	VII. Hemorrhagic septicemia	VIII. Pneumococcus meningitis	Total

REPORT OF INFLUENZA OUTBREAK IN THE THIRTEENTH NAVAL DISTRICT.

(A report submitted by the medical aid to the commandant of the thirteenth naval district.)

Influenza first appeared in serious form in this naval district September 17, 1918. September 16 a draft of 334 men was received from Philadelphia. This draft reached Seattle, Wash., at about 9 p. m., and was ferried across the sound on barges, disembarking at about 11 p. m. Many of the men were inadequately clothed. Few, if any, had overcoats, nor were they properly supplied with blankets. A number complained of cold on the trains. Eleven were sick upon arrival, and, while waiting around the detention camp for their clothing, blankets, and disinfection of their effects, some became so ill that it was necessary to remove them at once to the sick bay and later to hospital. The men were up almost all night in the process of reception.

On September 18 and September 20 approximately the same number of men were received at the same time and under practically the same circumstances. These three drafts from Philadelphia were kept in isolation for a period of one month in the detention camp, navy

yard, Puget Sound.

Of the first draft, 11 were sick upon arrival; of the second, it was necessary to remove 8 to sick quarters by ambulance, and 23 had to fall out during muster; of the third draft, 8 arrived by ambulance and 5 fell out during muster. Most of those who fell out during muster, or "dropped in their tracks," to use the words of the medical officer, were suffering from exhaustion, for they recovered the following day.

Our experience with the disease has been similar to that in other districts throughout the United States. The disease has shown special predilection for the enlisted personnel, especially those between the ages of 18 and 26, large numbers of whom have come down within a very

short space of time.

On September 24, 1918, at a meeting of the board of health, thirteenth naval district, the question of quarantine against influenza was brought up and discussed. The following recommendations were made:

(a) That cases of influenza be isolated as early as possible.

(b) That all men remain away from public gatherings, such as theaters, dance halls, etc., for a period of 30 days.

(c) That attention be called to the dangers of coughing, sneezing, and expectorating.

(d) That men be instructed through their chief petty officers, or in such other way as seems best to their commanding officers, relative to sneezing, coughing, and expectorating, and that men found to be sneezing or coughing be sent to sick bay at once for treatment.

(e) That men be warned against using drinking fountains in public places outside of the

navy yard.

(f) That the roads and parade grounds be sprinkled at least twice daily.

These recommendations were officially approved.

In the meantime, Surg. B. J. Lloyd, United States Public Health Service, sanitary adviser and inspector, thirteenth naval district, addressed the various units of the training camp on the subject of prevention in relation to influenza, at which time it was pointed out that the epidemic then raging in the East would undoubtedly reach the Puget Sound station very soon.

Early in the epidemic it became apparent that the naval hospital, navy yard, Puget Sound, would be able to care for only the more serious cases, and that of necessity it could receive patients only from the 7,000 men attached to the navy yard, Puget Sound. September 28 the medical aid canvassed the various hospitals in Seattle with a view toward securing accommodations for the sick of the command at the Seattle training camp who might require hospital treatment. This survey was most unsatisfactory, as practically no outside hospital accommodations were available.

Tuesday, October 1, the president of the University of Washington was interviewed, and he very kindly allotted Lewis Hall, an unoccupied dormitory, for use as a temporary hospital. By this time the sick bay, hostess house, and armory were crowded with the sick, and as immediate results were imperative assistance was asked from the Red Cross through the local director. By October 2 Lewis Hall was completely equipped for service as a temporary hospital. Women nurses and a sufficient number of medical officers were secured with the approval of the bureau

and our prospects became brighter.

This epidemic has been characteristic in so far as its tendency to attack large numbers in a short space of time is concerned. Doctors and nurses were not immune. At the naval hospital 5 doctors and 6 nurses sickened in a few days. One doctor and 1 nurse succumbed. At the naval training camp, navy yard, Puget Sound, 3 doctors were attacked. At the naval training camp, Seattle, 4 doctors and 5 nurses became ill. About 20 Hospital Corpsmen also contracted the disease. All but those infected at the naval hospital recovered. The rapidity with which some have been seized with this disease and have succumbed to the infection has been appalling. Many who suffered with severe attacks, after they had been ill for three days, bore a striking resemblance to patients in the third week of typhoid fever.

The effect of the epidemic upon the city of Bremerton and its influence upon the civilian personnel attached to this navy yard was appreciated. On September 27 the medical aid personally consulted with the physicians of Bremerton, at which time they were warned to take measures to control the epidemic. It was suggested that churches, moving pictures, theaters, lodges, dance halls, skating rinks, and schools be closed; that the streets be sprinkled

frequently, as at this time there had been quite a dry spell.

The effects of the disease have, at this time, been so protean that it seems best to discuss them in only a general way, reserving detailed observations for a later report. The lungs, pleure, kidneys, brain, gall bladder, larynx, stomach, and intestines have all been attacked. The outstanding feature in serious cases is toxemia. In 75 per cent of the cases examined the hemolytic streptococcus has been obtained from the blood and from the organs mentioned above. Organisms have been recovered from the blood as early as 18 hours after the attack. Pneumococci have been recovered from the blood in only one case. The bacillus of Pfeiffer has not been found in any case.

At the suggestion of the sanitation officer, a vaccine was prepared from a hemolytic streptococcus isolated on September 25, and tried out on a few volunteers. There were no ill effects. It was then decided to vaccinate as many men as the facilities of our bacteriological laboratory would permit. Accordingly, from September 30 to October 25, 3,200 enlisted men, including marines who had not had influenza were given three injections at 48-hour intervals, starting with 60,000,000 for the first dose, 120,000,000 for the second dose, and 240,000,000 for the third dose. In our experience there have been practically no untoward

effects from the use of this vaccine.

The following record has been compiled from data procured in the training camps in connection with the use of the vaccine. Of 2,800 men who were vaccinated, 45 suffered mild attacks of influenza following the first injection; of the remainder, 8 were attacked after the second injection and 2 after the third. A draft of 111 Filipinos reported on October 4, during the height of the epidemic, and were isolated at once. They received three prophylactic injections, and only 2 of them were attacked. Eighty-three machinist's mates for aviation, who arrived on October 3, were isolated and vaccinated. Thirty-one contracted influenza after the first injection; 1 only after three injections. Three hundred and sixty-one Marines were vaccinated; 2 came down with influenza after the first injection; none were affected after the third. Sixty-two marines at the ammunition depot were vaccinated; 2 were taken with influenza after the second injection, and 1 after the third, no others being affected. Six hundred and sixty-two blue jackets, members of the naval unit attached to the University of Washington, were vaccinated; 3 came down after the first injection; 1 after the second, and 7 after the third. No deaths have occurred among those who have been vaccinated, and pneumonia has thus far not developed in those inoculated. Hemolytic streptococcus vaccine was first administered on September 30, 1918. It was impossible for us to prepare the vaccine in requisite amounts in time to inoculate the 11,000 men attached to the two training camps mentioned above. However, an effort was made to inoculate those who had not had the disease and who could be controlled for observation. Later on vaccine was furnished to the health departments of the cities of Seattle, Portland, and Bremerton. Copies of letters received from the Washington State commissioner of health and the city health officer of Seattle, Wash., are inclosed. It is believed that the administration of this vaccine has been justified by the results obtained. Our experience has forced us to the conclusion that while the influenza bacillus may or may not have been the original factor in connection with the epidemic in the East, the hemolytic streptococcus has been responsible for the deaths here and our efforts have been directed toward immunization against this organism.

Naval training camp, Seattle, Wash.: Complement 4, 159	Naval training camp, navy yard, Puget Sound, Wash.—Continued.	
Number of admissions for influenza from Sept.	Percentage of complement attacked	9.79
25, 1918, to Oct. 21, 1918	Case fatality rate	9. 95
Deaths	Philadelphia draft (included in complement for	
Percentage of complement attacked 19.54	navy yard):	
Case fatality rate 4. 05	Complement	1,007
Naval training camp, navy yard, Puget Sound,	Number of admissions for influenza from Sept.	
Wash,:	25, 1918, to Oct. 21, 1918	205
Complement		21
Number of admissions for influenza from Sept.	Percentage of complement attacked	20.3
25, 1918, to Oct. 21, 1918	Case fatality rate	10. 2
Deaths	The state of the s	
	The state of the s	

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In a general way it may be stated that we are still in doubt as to the etiology of this outbreak. The influenza bacillus has not been isolated in any case. If we are dealing with two distinct types of disease it is our opinion that if the influenza bacillus was responsible for the beginning of this pandemic, as far as our experience in this district is concerned, this organism is without importance. We are dealing here, especially in the serious cases, with a hemolytic streptococcus, which may be a primary or a secondary invader and which is responsible for our mortality. The pneumococcus has been isolated in only one instance. In practically all other cases examined the hemolytic streptococcus has been found in the blood as early as 18 hours after invasion, and in the blood of some who have recovered. Our results with the vaccine referred to previously would seem to bear out our contention which points toward the streptococcus as the culprit. We feel certain that overcrowding, with its increased opportunity for cross infection, is of the greatest importance as a predisposing factor.

It is further submitted that greater care in transporting troops under certain circumstances should be observed. Contracts with railroads should provide for adequate heating, sufficient bed clothing, and one berth per man. Troops to the number of 100 or over should be accompanied by a medical officer. Troops should not be detrained at night. Trains arriving late at night should be sidetracked and remain intact until morning, if in the judgment of the medical officer and officer in charge of the detachment such procedure is warranted. It is believed that the high mortality in the Philadelphia draft was due in part to the conditions

under which they were transported to this yard.

Too much can not be said by way of appreciation with regard to the whole-hearted assistance which has been rendered at a time of great emergency by commanding officers, doctors, nurses, Hospital Corpsmen, the president of the University of Washington, and the director of the Seattle division of the American Red Cross.

(1-4-A-1-17)										
	Diseases r	eported in	n 1 ship of	f the fleet,	week end	led Sept.	21, 1918.			590
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INSTRUCTIONS TO MEDICAL OFFICERS.

Hereafter triple typhoid lipo-vaccine will be furnished in place of the triple typhoid saline vaccine which has been used in the past. The Army is prepared to furnish the lipo-vaccine and is now using it to vaccinate Army personnel against typhoid and para typhoid fevers.

The following instructions covering its use will be sent with each consignment:

Each c. c. of this vaccine contains 2,500 million bacillus typhosus, 2,500 million bacillus paratyphosus A and 2,500 million bacillus paratyphosus B. On standing in the cold some of the fats may separate and cause a precipitate.

This will disappear on standing a short time at room temperature.

A single dose of 1 c. c. of this vaccine is sufficient. It is especially important that this vaccine be given subcutaneously, and not intravenously, intramuscularly, or under the fascia. In order to insure this, you will pick up a fold of skin and inject into the subcutaneous tissue of that fold. Practically all the severe reactions that have been reported have been due to neglect of this precaution. The deep injection of this vaccine may lead to fat embolism

and defeats the object of the inoculation.

The precautions to be taken regarding absence of temperature or disease are the same as are given for typhoid vaccine in Circular No. 16, War Department, Office of the Surgeon General, March 20, 1916. It is advisable to give the vaccine about 4 o'clock in the afternoon, and the man should be required to remain in quarters for 24 hours after

the injection.

Extract from Circular No. 16, War Department, Office of the Surgeon General, Washington, March 20, 1916:

The site of the inoculation is the arm at the insertion of the deltoid muscle. If for any reason this site can not be used, the needle may be introduced in the back, over the lower portion of the scapula, or in the chest below the clavicle. The dose is to be given subcutaneously and not into the muscles nor into the skin. The arm should be cleansed as for any other operation. Tincture of iodine painted over the dry skin, before and after the injection, has proved sat-

The ampul should be washed off in an antiseptic solution and opened after making one or more cuts near the top

The ampul should be washed off in an antiseptic solution and opened after making one or more cuts near the top with a file. The vaccine can be drawn out of the container with a syringe. The syringe and needle should be sterilized by boiling. To insure perfect sterilization draw the piston out to its full length, or remove it entirely, so that the barrel is full of water during the boiling. A fresh needle should be used for each man, or, if one needle must be used on two or more men, it should be resterilized before each injection.

No person should be vaccinated who is not perfectly healthy and free from fever. The temperature will be taken before vaccination is begun, and, in doubtful cases the urine should be examined; if fever or any other symptoms of illness are present the procedure should be postponed. This precaution is necessary to avoid vaccinating men who may be in the incubation stage of typhoid or other fever. Neither beer nor alcohol in any other form should be drunk on the day of treatment. on the day of treatment.

Under certain nomenclature titles the following terms are frequently used in entering the diagnosis on Form F cards: Condyle, cuneiform, phalanx, scaphoid, etc. To enable the Statistical Section to make proper classification, the foregoing terms, when used on Form F cards, should be amplified by definitely stating the location, viz:

Condyle: State whether internal or external and the bone involved.

Cuneiform: Carpal or tarsal.

Phalanx: Proximal, middle, or distal, and first, second, third, etc., finger or toc, and whether right or left hand or foot, as indicated.

Scaphoid: Carpal or tarsal.

Medical officers are invited to submit to the bureau any suggestions that they believe may be useful in extending the scope of this bulletin to render it of greater value. Questions in the field of preventive medicine will be welcomed and will be answered in accordance with the best available authority.

Criticism of anything contained in the body of the bulletin or in any of the statistical tables will be appreciated. In referring to any article appearing in a bulletin, reference should be made to the letters and numbers in the upper right-hand corner, as well as to the serial number.

The following statistics are furnished for the information of medical officers:

The annual rates shown in the tables are obtained in the following way: The figure representing the total original admissions to the sick list or the number of deaths reported during the week is multiplied by 1,000 and divided by the complement. The quotient is then multiplied by 52. As weekly figures always fluctuate widely, caution must be used in interpreting annual rates calculated on a weekly basis. In the following tables it may be taken for granted where no figures appear that the disease did not occur, or, if in reference to hospitals, that no case was admitted. The figures in column "Total admissions for communicable diseases" do not include venereal diseases.

W. C. Braisted.

¹ Medical officers who require additional saline vaccine to complete a series of inoculations already begun with the triple typhoid saline vaccine should so state in letters or telegrams requesting vaccine.

9,36 09 Table 1.—ADMISSIONS TO SICK LIST AND ADMISSION RATES, TRAINING STATIONS, CAMPS, AND OTHER LARGER SHORE STATIONS, WEEK ENDED NOV. 2, 1918. Annual rate per I,000. 28. Syphilis 32. 24 42. 64 107. 12 21. 32 29. 12 102. 44 158. 08 94 48 121, 16 . 84 09 Annual rate per 1,000.1 60. 58. 38 28. .07 07 1-1 O Gonococcus infec-tion, Venereal diseases. 145.08 Annual rate per I,000, . 6 Chaneroid, 5288288682 32 32 32 05 05 94 26 68 13 24 24 01 96 A verage rate since July 1, 1918. 43. 58. 43. 25. 16. 26. 116. 117. 270. 21. 23. 17. 09. 69. 44228848 00 94 121, 16 88 89 Annual rate per I,000, 32. 107. 102. 158. 158. .7. 57. 145. 285. 58. .09 Total admissions, venereal. 2 **1112%~13** :21 13 36 36 92 92 73 68 74 25 12 12 12 08 8 8 8 8 240. 437. Average rate since July 1, 1918. 015. 875. 836. 123. 851. 484. 324. 068. 707. -100 m Į, and injuries. 23 48 68 68 96 8268 89 76 1, 040. (1, 376. 4 571. 3 1, 220. 9 572. 016. 570. Annual rate per 1,000, Diseases 27 4 29 83 39 200 Total admissions, 350 900 900 900 900 900 986 986 986 916 916 687 599 428 350 700 091 511 Complement. Radio school, Harvard University.
Receiving ship Boston, Commonwealth Pier.
Rifle range, Wakefield, Mass.
Training camp, Bunkin Island, Boston, Mass.
Training camp, Hingham, Mass.
Other stations. District section headquarters, Bar Harbor, Me... District section headquarters, Portland, Me.... Mass
District section headquarters, Rockland, Me
Fuel oil school, Quincy, Mass District section headquarters, Boston, Mass. District section headquarters, Provincetown, Naval prison, Portsmouth, N. H. Detention camp, Deer Island, Mass..... Air station, Chatham, Mass...... Aviation school, Cambridge, Mass..... Ammunition depot, Iona Island, N. Y Bayshore, Long Island, N. Montauk, N. Y. SECOND NAVAL DISTRICT. Rockaway, Long Island, THIRD NAVAL DISTRICT. FIRST NAVAL DISTRICT. District headquarters, Boston, Mass. Training station, Newport, R. 1...
Other stations..... (Lockwood's Basin)..... Air station, Air station, Air station,

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6, 482 1, 013 1, 313	757 438 709 1,772 1,772 1,600	3, 600 5, 300 11, 000 12, 476 35	1,500 1,500 645	1, 152 221 300 6, 825 1, 414	1, 100 694 500 250 8, 000 10, 581
Armed draft detail, New York: In barracks. Afloat. Auxiliary reserve school, Pelham Bay, N. Y. District section headquarters, Bath Beach, Long Island, N. Y. District section headquarters, Montauk, Long	Island, N. Y. District section headquarters, New Haven, Conn. District section headquarters, Sayville, Long Island, N. Y. District section headquarters, Tompkinsville, N.Y. District section headquarters, Whitestone, Long Federal rendezvous, Brooklyn, N. Y. Fleet Supply base, Brooklyn, N. Y. Navy yard, including marine barracks, New York Office of supervisor, auxiliary reserve, New York.	Recruiting station, New York Reserve force headquarters, New York Reciving ship New York, including Ellis Island. Rifle range, Peekskill, N. Y. Steam engineering school, Stevens Institute, Hoboken, N. J. Training camp, Pelham Bay, N. Y. Other stations.	Air station, Cape May, N. J. Ammunition depot, Dover, N. J. District section headquarters, Cape May, N. J. District section headquarters, Lewes, Del. Distributing barracks, Pier No. 19, Philadelphia, Pa.	Navy yard, Philadelphia, Pa. Officer's material school, University of Pennsylvania, Philadelphia, Pa. Radio school, Philadelphia, Pa. Receiving ship, Philadelphia, Pa. Training camp, Cape May, N. J. Other stations.	Air station, Hampton Roads, Va. Ammunition depot, Portsmouth, Va. District section headquarters, Baltimore, Md. District section headquarters, Cherrystone, Va Marine barracks, Quantico, Va Training station, Hampton Roads, Va

Table 1.—ADMISSIONS TO SICK LIST AND ADMISSION RATES, TRAINING STATIONS, CAMPS, AND OTHER LARGER SHORE STATIONS, WEEK ENDED NOV. 2, 1918—Continued.

T	Diseases and injuries.	Complement. Total admissions, all causes. Annual rate per 1,000. Average rate since July 1, 1918.		olk, Va. 2, 215 5 117, 00 1, 177, 86 31k, Va. 375 4 554, 32 1, 249, 78 790 4 263, 12 688, 65		8, 549 389 2, 366.00 1, 153.82 15 1, 000 5 260.00 353.60 16 1, 000 6 18 1, 398.80 1, 739.61 16 1, 000 6 312.00 541.94 1 4, 349 110 1, 315.08 235.32 1 1, 273 22 898.56 3, 306.78		1, 387 30 1, 124. 24 1, 416. 53 2 743 12 839. 80 592. 21 2, 236 45 1, 046. 24 1, 485. 84 3		1, 901 17 464. 88 3, 119. 73 2 2, 177 48 1, 146. 60 2, 081. 40 10 5, 508 91 859. 04 1, 361. 33	ricts.	1, 554 20 669.24 1, 366.21 3	hio 1,200 7 520.00 1,271.39 hio 650 8 639.60 769.40
			FIFTH NAVAL DISTRICT—continued.	2 1 1 1 1	SIXTH NAVAL DISTRICT.	Marine barracks, Paris Island, S. C. Navy yard, Charleston, S. C. Receiving ship, Charleston, S. C. Rifle range, Charleston, S. C. Training camp, Charleston, S. C. Training camp, Charleston, S. C. Tother stations.	SEVENIU NATAL DISINICI:	Air station, Miami, Fla. (naval)	EIGHTH NAVAL DISTRICT.	Training camp, Gulfport, Miss. 1, Training camp, New Orleans, La. 2, Training camp, Pensacola, Fla. 5, Other stations.	NINTH, TENTH, AND ELEVENTH NAVAL DISTRICTS.	Auxiliary reserve school, Chicago, Ill	Buffalo, N. Y. District section headquarters, Cleveland, Ohio

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128. 44 161. 72 73. 84	39. 52 27. 56 20. 80 16. 12		40. 80
27.82	H 40HH	2 1	422
1, 376. 33 608. 21 1, 762. 92 959. 81	1, 038.08 1, 769.77 1, 769.77 1, 155.46 1, 388.89 1, 385.47 1, 385.47 1, 385.47	386. 22 637. 00 850. 56	1, 043, 40
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61 8 6 9 328	176 51 47 39 128 190 33 127	32 32 62 62 63 64 64 64 64 64 64 64 64 64 64 64 64 64	0,000
1, 550 807 962 39, 975	1,525 3,000 1,307 7,507 4,912 4,706	1, 097 6, 044 4, 046	721,040
Dunwoody Industrial Institute, Minneapolis, Minn. Biffe range, Camp Logan, Waukegan, Ill Training camp, Detroit, Mich. Training station, Great Lakes, Ill Other stations	Air station, San Diego, Cal. District section headquarters, San Diego, Cal. Bistrict headquarters, San Francisco, Cal. Submarine base, San Pedro, Cal. Training camp, Mare Island, Cal. Training camp, San Diego, Cal. Training camp, San Pedro, Cal. Training station, San Francisco, Cal. Other stations.	Navy yard, including marine barracks, Puget Sound, Wash. Receiving ship, including training camp, Puget Sound, Wash. Training camp, Seattle, Wash. Total	2 a a a a a a a a a a a a a a a a a a a

Table 1.—ADMISSIONS TO SICK LIST AND ADMISSION RATES, TRAINING STATIONS, CAMPS, AND OTHER LARGER SHORE STATIONS, WEEK ENDED NOV. 2, 1918—Continued.

Annual rate per 1,000.	43.16	15.60	
wmw.	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	67	1
Annual rate per 1,000.		7.80	0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0
Measles.		:::-:	1 1 1 1
Annual rate per 1,000.		19.24	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
German measles.		: :- : :	: : : :
Annual rate per 1,000.	32.24	7.80	
Malaria.		::::	* * * *
Annual rate per 1,000.		8 8 8 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	
Diphtheria.			* * * *
Annual rate per 1,000.		* * * * * * * * * * * * * * * * * * *	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Cerebrospinal fever.		* * * * * * * * * * * * * * * * * * *	
Average rate since July 1, 1918.	131. 04 1114. 92 88. 93. 02 201. 63 30. 55 117. 03 117. 03 1109. 39 113. 07 1109. 39 113. 07 113. 07 113. 07 113. 07	5. 62 64. 42 20. 62 101. 22	29. 56 24. 05 28. 35 116. 62
Annual rate per 1,000.	60.84 47.32 28.60 32.24 43.16	13. 00 19. 24 39. 00	58, 76
Total admissions communicable diseases, excitations of influenza.	Ø1 1 1 4	ם הו	н н
	Air station, Chatham, Mass. Ammunition depot, Hingham, Mass. Aviation school, Cambridge, Mass. District neadquarters, Boston, Mass. District section headquarters, Boston, Mass. District section headquarters, Portland, Me. District section headquarters, Provincetown, Mass. District section headquarters, Rockland, Me. Chiel District Section headquarters, Rockland, Me. District section headquarters, Rockland, Me. District section headquarters, Combridge, Mass. Navy yard, Boston, Mass. Navy yard, Boston, Combridge, Mass. Receiving ship Boston, Commonwealth Pier Receiving ship Boston, Commonwealth Pier Receiving ship Boston, Bumkin Island, Boston, Mass. Training camp, Hingham, Mass. Other stations.	SECOND NAVAL DISTRICT. District section headquarters, New London, Conn Receiving barracks, Newport, R. I. Submarine base, New London, Conn Training station, Newport, R. I. Other stations.	Air station, Bay Shore, Long Island, N. Y. Air station, Montauk, Long Island, N. Y. Air station, Rockaway, Long Island, N. Y. Ammunition depot, Iona Island, N. Y.

	55.38	6.24.44
		24, 44
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7. 80 174. 20 30. 16 32. 50 29. 12 33. 28		104.00 32.24 102.96 13.52 554.32 65.52
H	m	25 21 1
Armed draft detail, New York Auxiliary reserve school, Pelham Bay, N. Y District section headquarters, Bath Beach, Long Island, N. Y District section headquarters, New Haven, Conn. District section headquarters, New Haven, Conn. District section headquarters, Tompkinaville, N. Y District section headquarters, Tompkinaville, N. Y District section headquarters, Whitestone, Long Island, N. Y Redry I and Conney Con	Air station, Cape May, N. J. Ammunition depot. Dover, N. J. District section headquarters, Cape May, N. J. District section headquarters, Lewes, Del. Navy yard, Philadelphia, Pa. Officer material school, University of Pennsylvania, Philadelphia, Pa. Radio school, Philadelphia, Pa. Receiving ship, Philadelphia, Pa. Training camp, Cape May, N. J. Other stations.	Air station, Hampton Roads, Va. Ammunition depot, Portsmouth, Va. District section headquarters, Baltimore, Md. District section headquarters, Cherrystone, Va. Marine barracks, Quantico, Va. Training station, Hampton Roads, Va. Training station, Hampton Roads, Va. Receiving ship, including st. Helena, Norfolk, Va. Riffe range, Glenburnie, Md. Riffe range, Virginia Beach, Va. Other stations.

Table 1.—ADMISSIONS TO SICK LIST AND ADMISSION RATES, TRAINING STATIONS, CAMPS, AND OTHER LARGER SHORE STATIONS, WEEK ENDED NOV. 2, 1918—Continued.

Annual rate per 1,000.	5. 72	37.44	23.40	66. 56
Mumps.	-	H 12	red i	2 15
Annual rate per 1,000.		* 1	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
Measles.	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	8 8 8 8 8 8 8 8 8 8	9 9 9 6 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
Annual rate per 1,000.		8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		
German measles.				
Annual rate per 1,000.		22. 88	47.32	
.sitelaM			67.67	
Annual rate per 1,000.	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 0 0 0 1 0 0 0 0 0 1 0 0 0 0 0	1 1 6 6 1 1 0 0 0 0 0 0 0 0 0 0 0	
Diphtheria.	, , , , , , , , , , , , , , , , , , ,			*
Annual rate per 1,000.		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
Cerebrospinal fever.		* * * * * * * * * * * * * * * * * * *	0 0 0 0 0 0 0 0 0 0 0 0	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Average tate since July 1, 1918.	35.96 10.40 45.50 10.40 47.93 263.77	56. 81 21. 03 38. 99	42. 57 111. 05 15. 38	44. 24 44. 24 76. 75 29. 90 189. 58 580. 09 191. 68
Annual rate per 1,000.	188, 24 52, 00 47, 32	74. 88 69. 68 184. 60	119. 08 28. 08	66. 56 159. 64 603. 72 36. 40
Total admissions com- municable diseases, ex- clusive of influenza.	31.	01-10	ಸ್ ಬ	, , , , , , , , , , , , , , , , , , ,
	Marine barracks, Paris Island, S. C. Navy yard, Charleston, S. C. Receiving ship, Charleston, S. C. Rife range, Charleston, S. C. Training camp, Charleston, S. C. Other stations.	Air station, Miami, Fla. (Naval). Air station, Miami, Fla. (Marine). Training camp, Key West, Fla. Other stations.	EIGHTH NAVAL DISTRICT. Training camp, Gulfport, Miss Training camp, New Orleans, La Training camp, Pensacola, Fla Other stations.	NINTH, TENTH, AND BLEVENTH NAVAL DISTRICTS. Auxiliary reserve school, Chicago, III Aviation detachment, Curtiss Aeroplane Plant, Buffalo, N. Y. District section headquarters, Cleveland, Ohio District section headquarters, Detroit, Mich. Dunwoody Industrial Institute, Minneapolis, Minn. Riffe range, Camp Logan, Waukegan, III Training camp, Detroit, Mich. Training station, Great Lakes, III. Other stations.

	214.76	152.36 497.12	165.36	D c c c c c c c c c c	94, 64	91.96	35, 88
	4	22 47	15	*	22	7	171
3	33.80		* * * * * * * * * * * * * * * * * * *	0 0 6 5 3		68.64	3, 12
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		31.72		a e e			. 52
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;	23. 58 74. 70 106. 89	48. 47 259. 36 536. 32	39, 11 368, 17	6 0 0 0 1	29, 46	80.42	114.67
	33.80	39.52 152.36 528.84	176.28	e 0 3 3 5 6	94. 64	68. 64 372. 32	66.04
	H 4	22 50	16	0	67	29	316
TWELFTH NAVAL DISTRICT.	Air station, San Diego, Cal. District section headquarters, San Diego, Cal. District section headquarters, San Francisco, Cal.	Submarine base, San Pedro, Cal. Training camp, Mare Island, Cal Training camp, San Diego, Cal	Training camp, San Fedro, Cal. (municipal pier)Training station, San Francisco, Cal	THIRTEENTH NAVAL DISTRICT.	Navy yard, including marine barracks, Puget Sound,	receiving ship, including training camp, ruger Sound, Wash. Training camp, Seattle, Wash. Other stations.	Total.

Table 1.—ADMISSIONS TO SICK LIST AND ADMISSION RATES, TRAINING STATIONS, CAMPS, AND OTHER LARGER SHORE STATIONS, WEEK ENDED NOY. 2, 1918—Continued.

Annual rate per 1,000.		485.68	580.84	406.64	143.00 435.24		241.80	52.00	65.00 42.64	228. 28	40.00	210, 60 715, 32		117.00	39.00		118,04	212, 68	71.76	277.16	355. 68
Influ-		4	19	4	ಬಂಬ		7.7	1670	2-1	21	2	15		68	, ro		67		J Ø Ø	100	00
Annual rate per 1,000.		9 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, , , , , , , , , , , , , , , , , , ,	* 1 * 4 * 1 * 5			1 1						, , , , , , , , , , , , , , , , , , ,	* * * * * * * * * * * * * * * * * * * *			0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Ty-					, , , , , , , , , , , , , , , , , , ,								•								
Annual rate per 1,000.		2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;						1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	, , , , , , , , , , , , , , , , , , ,						· · · · · · · · · · · · · · · · · · ·
Small- pox.		0 1			5 F 5 5 5 6 6 7 7 7	* * * * * * * * * * * * * * * * * * * *		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			5 5 5	0 0 0 0 0 0 0 0 0 0	1 0 0 1 0 2 0 0 0 1 0 0 1 0 0			0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		1 1 1	
Annual rate per 1,000.			47 29	71.07		* * * * * * * * * * * * * * * * * * * *								13.00				6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 4	
Scarlet fever.		0 1 0 1 0 1		- :	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6 0 1 6 9				1 1 2 0 6 0 1 0 1 0			• • • •	H							
Annual rate per 1,000.		8 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						1			-	, , , , , , , , , , , , , , , , , , ,						6 6 8 8	
Tuber-		* * *			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* 1 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		1	· · · · · · · · · · · · · · · · · · ·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				, , , , , ,				0 0 1 0 0 1 0 0 1 0 0 1		1	
Annual rate per 1,000.		0 1	60.84		28. 60			26.00						1 1	7.80		58.76	42.12	7.80		
Pneu- monia.		0 0	2		-	1			1 1	1 1 6 1 1 0 1 0 1 1				9 9 4 9 9 1 9 7	-		H				* 5
	FIRST NAVAL DISTRICT.	Air station, Chatham, Mass.	Aviation school, Cambridge, Mass		District section neadquarters, Boston, Mass. (Lock-woods Basin) District section headquarters, Bar Harbor, Me	District section headquarters, Fortland, Me.	District section headquarters, Rockland, Me.	Naval Prison, Portsmouth, N. H.	Navy yard, Boston, Mass. Navy yard, Portsmouth, N. H.	Ufficer matchal school, (ambridge, Mass. Radio school, Harvard University. Progring ship Boston (Commonwellth Dien	Rifle range, Wakefield, Mass	Training camp, Bumkin Island, Boston, MassTraining camp, Hingham, Mass	SECOND NAVAL DISTRICT.	District section headquarters, New London, Conn Receiving barracks, Newport, R. I.	Submarine base, New London, Conn. Training station, Newport, R. I. Other stations.	. THIRD NAVAL DISTRICT.	Air station, Bayshore, Long Island, N. Y.	Air station, Rockaway, Iong Island, N. Y. Ammunition de Poot. fona Island, N. Y.	, Y	District section neadquarters, Bath Beach, Long Island, N. Y. District section headquarters, Montauk, Long Island,	District section headquarters, New Haven, Conn

208.00 58.24.80 58.24.68.24 183.04 130.00 2, 238.60 156, 72 520.00	1. 485. 64	1, 241. 24 208.00 1, 241. 24 294. 84 117. 00 20. 28	1, 538. 68 154. 96 860. 60 244. 92
10 10 10 20 20	20	4 L L C C C C C	253 2 77 72 6
4.16		4.68	
32.50		9	52.00
174.20 30.16 71.76 9.36		19.24	182.00
0 HOL 10-1 0		H 0000	30
District section headquarters, Sayville, Long Island, N. Y. District section headquarters, Tompkinsville, N. Y. District section headquarters, Whitestone, Long Island, N. Y. Federal rendezvous, Brooklyn, N. Y. Fleet supply base, Brooklyn, N. Y. Navy yard, including Marine barracks, New York Office of supervisor, auxiliary reserve, New York Office of supervisor, auxiliary reserve, New York Office of supervisor, auxiliary reserve, New York Recruing station, New York. Reserve force headquarters, New York. Ride range, Peekskill, N. Y. Steam engineering school, Stevens Institute, Hoboken, N. J.	Other stations. FOURTH NAVAL DISTRICT. Air station, Cape May, N. J. Ammunition depot, Dover, N. J. District section headquarters, Cape May, N. J. District section headquarters, Lewes, Del. Navy yard, Philadelphia, Pa. Philadelphia, Pa. Radio school, Philadelphia, Pa. Receiving ship, Philadelphia, Pa. Receiving ship, Philadelphia, Pa. Training camp, Cape May, N. J. Other stations.	Air station, Hampton Roads, Va. Ammunition depot, Portsmouth, Va. District section, headquarters, Baltimore, Md. District section headquarters, Cherrystone, Va. Marine barracks, Quantico, Va. Tranning station, Hampton Roads, Va. Navy yard, including marine barracks, Norfolk, Va. Rifle range, Glenburnie, Md. Rifle range, Glenburnie, Md. Rifle range, Virginia Beach, Va. Other stations.	Marine barracks, Paris Island, S. C. Navy yard, Charleston, S. C. Receiving ship, Charleston, S. C. Rifle range, Charleston, S. C. Training camp, Charleston, S. C. Other stations.

Table 1.—ADMISSIONS TO SICK LIST AND ADMISSION RATES, TRAINING STATIONS, CAMPS, AND OTHER LARGER SHORE STATIONS, WEEK ENDED NOV. 2, 1918—Continued.

The state	Annual rate per 1,000.	149.76 279.76 604.24	109.20 310.44 235.56	234.00	7	52.00	2, 796. 44 2, 366. 00 814. 32 1, 232. 92 304. 72 698. 36 296. 40		42.64	332.80
	Influ- enza.	4 4 26	113	7	G004	40	071 074 44 44 188 188 188		18	1,581
	Annual rate per 1,000.		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
1 1 1 1 1 1 1	Ty- phoid.									
	Annual rate per 1,000.									
	Small- pox.	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
	Annual rate per 1,000.									. 52
	Scarlet fever.									4
	Annual rate per 1,000.		23.40							. 52
	Tuber- culosis.		T	* • • • • • • • • • • • • • • • • • • •				0 0 0		4
100	Annual rate per 1,000.	37. 44 69. 68	23. 40 9. 36		159. 64 100. 36	2.60	39. 52		282, 36	21.84
	Pneu- monia.	:	нн		0,00	2			22	105
		Air station, Miami, Fla. (naval) Air station, Miami, Fla. (marine) Training camp, Key West, Fla. Other stations	EIGHTH NAVAL DISTRICT. Training camp, Gulfport, Miss. Training camp, New Orleans, La. Training camp, Pensacola, Fla. Other stations.	Auxiliary reserve school, Chicago, III Aviation detachment, Curtiss Aeroplane Plant, Buffolo, N. V.	District section headquarters, Cleveland, Ohio District section headquarters, Detroit, Mich Dunwoody Industrial Institute, Minneapolis, Minn Rifle range, Camp Logan, Waukegan, III. Training camp, Detroit, Mich	Training camp, Great Lakes, Ill. Other stations. TWELFTH NAVAL DISTRICT.	Air station, San Diego, Cal. District section headquarters, San Diego, Cal. District section headquarters, San Francisco, Cal. Submarine base, San Pedro, Cal. Training camp, Mare Island, Cal. Training camp, San Diego, Cal. Training camp, San Pedro, Cal. Training station, San Francisco, Cal. Other stations.	THIRTEENTH NAVAL DISTRICT. Navy yard, including marine barracks, Puget Sound, Wash.	Receiving ship, including training camp, Puget Sound, Wash Training camp, Seattle, Wash Other stations	Total

TABLE 2.—SUMMARY OF REPORTS FROM NAVAL HOSPITALS AND SICK QUARTERS, WEEK ENDED OCT. 26, 1918.

Annapolis. 1 1 1		Cere spin fev	nal	Dip	oh- ria.	Mala	ria.	Gerr	nan sles.	Mea	sles.	Muı	nps.	Pneum	ionia.	Scar		Al	l causes.	
Cape May 1<	Hospitals.		Admitted.	Under treat- ment.	Admitted.	Under treat- ment.	Admitted.	Under treat- ment.	Admitted.	Under treat- ment.	Admitted.	Under treat- ment.	Admitted.	Under treat- ment.	Admitted.	Under treat- ment.	Admitted.	Under treat- ment.	Admitted.	Discharged.
San Diego 1 3 27 17 89 64 14 4 Washington 4 4 13 13 13 13 14 14 13 15 16 16 16 16 3,328 156 24	Cape May Charleston Chelsea Great Lakes Gulfport Hampton Roads Key West League Island Mare Island New London Newport New York Norfolk New Orleans Paris Island Pelham Park Pensacola Philadelphia Portsmouth Puget Sound Quantico 1 San Diego Washington	1 33 15 2 11 12 10 1	2 2 2	10 7 29 1 11 2 6 1 1 1	3	3 1 1 2 1 3 8 1 7 1	1	7		8 5 9 1 3 2 13 6 2 3 1 9 27	2 3	7 400 8 1 21 3 328 328 3 19 6 3 3 19 2 4 4	16 	1 6 6 4 4 1, 359 63 368 113 5 13 36 234 158 367 9 1 293 58 18 62 19	2 6 2 8 9 19 5 7 45 23 4 10 6 2 3 3	2 13 1 3	1 1 4	330 104 465 759 1, 738 136 673 234 173 726 214 717 2, 943 1, 653 165 134 643 181 697 189 254	81 35 73 164 97 27 84 51 35 174 63 90 675 233 73 38 466 64 28 50 251 52 2,538	866 377 1955 140 220 555 79 180 56 341 80 186 689 241 103 254 442 73 254 47 73 254 57 68

1 Report not received.

Table 3.—NUMBER OF ADMISSIONS AND ANNUAL RATES, ENTIRE NAVY, WEEK ENDED OCT. 19, 1918.

[Rates based on an estimated complement of 550,000.]

Class.	Number of cases.	Annual rate per 1,000.	Class.	Number of cases.	Annual rate per 1,000.
Diseases of blood. Diseases of circulatory system Diseases of digestive system Diseases of ductless glands and spleen. Diseases of ear Diseases of eye and adnexa. Diseases of genito-urinary system (nonvenereal). Diseases of infective type (nonvenereal). Diseases of infective type (venereal).	36 687 61 46 165 8, 945	845, 52 68, 64	Diseases of motor system Diseases of nervous system Diseases of respiratory system Diseases of skin, hair, and nails Hernia Miscellaneous diseases and conditions Parasites (fungi and certain animal parasites) Tumors Injuries Poisons	78 68 1, 337 70 37 126 68 6 456 6	126. 30
Diseases of lymphatic system Diseases of mind	32 35	00.01		12, 988	1, 227. 75



TABLE 4.—TOTAL ADMISSIONS REPORTED BY FORM F CARDS FOR CERTAIN COMMUNICABLE DISEASES, OTHER THAN VENEREAL DISEASES, AND ANNUAL RATES, ENTIRE NAVY, WEEK ENDED OCT. 19, 1918.

[Rates based on an estimated complement of 550,000.]

200	N	umber of	Annual rate	1000000	Turbulet Times		Number of	Annual ra
Disease.		lmissions.	per 1,000.		Disease.		admissions.	per 1,000.
		+ 1		6 1 2		1 1 3	190	offices.
erebrospinal fever	ART ST	15	1.41	Chicken p	ox	EL EL	6	0.50
iphtheria	Swit B.	19	1.79	Dengue.		1415	19	1.79
alaria		45	4. 23	Influenza.			8, 315	785. 72
easles		32	3. 01	Paratypho	id fever		1	. 09
umps		209	19.76		coughsis		2	. 19
neumonia, broncho neumonia, lobar		584	55. 12 18. 72	Tuberculo	818	- 1000	31.	2. 9
arlet fever		8	. 75	Tota	din a din		9,491	906. 3
phoid fever	1 1 6	2	.19	1000	The second	1 1 5	0, 101	good.
82 174 1887 1 1	9 0		18 1	10 12 1 1	1. 11 19:01			swells
1 22 1 22 1 2	100 3 18	9 1	7.21-1-5-			1	1	· · · · · · · · · · · · · · · · · · ·
rebrospinal fever phoid fever her infections	G. 1. Ca. 1.4				de la			Mary Wall
her accidents and injur.	ies				deselventer der			DESCRIPTION OF
her accidents and injur.	ies				deselventer der			STATE OF BE
her accidents and injur. Total	ies	911000						10006
her accidents and injur. Total	ies	911000						10006
her accidents and injur. Total	ies	911000	1 Pnaum	oggogatis 2				56. 56.
her accidents and injur. Total	usand, all cusand, disea	ausesases only.	1 Pnaum	oggogatis 2				56. 56.
owning. her accidents and injur Total. nual death rate per tho nual death rate per tho	ies	ausesases only.	1 Pnaum	oggogatis 2				6 56. 56.
her accidents and injur. Total	usand, all c usand, disea	ausesases only.	1 Pneum	oggogatis 2				6 56.

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